

STATE OF HAWAII—DEPARTMENT OF TAXATION
REQUEST FOR COPIES OF INCOME TAX RETURN

Date: _____

IMPORTANT: Before completing this form, please read instructions on the back of Form.
PLEASE PRINT

1. Name of taxpayer(s) as shown on tax form	3. Taxpayer's Social Security Number or Federal Employer Identification Number
2. Current Name and Address	4. Spouse's Social Security Number
	5. Tax form number (Form N-11, N-12, N-13, etc.)
Account Number (For office use only)	6. Tax year (No more than 3)
(A)	(A)
(B)	(B)
(C)	(C)
Telephone number of Requestor Business: (_____) _____ Home: (_____) _____	7. (Check box) <input type="checkbox"/> Request for copies <input type="checkbox"/> Request for certification

Please sign here:

_____ Date: _____

GOVERNMENT AGENCIES ONLY

(Check box)

Name of Requestor : _____

☐ Photocopy
(IRS only) ☐ Review only

Department of Requestor: _____

Mailing address, if applicable: _____

Signature of requestor's supervisor

Supervisory Investigator

Telephone number: _____

Date picked up: _____

Signature upon pickup _____

OFFICE USE ONLY

(For other than government agency requests)

Photocopies

Total Cost:

Number of pages: _____ x \$1.00 = _____

Number of Certified copies: _____ x \$1.00 = _____

Date picked up: _____

Examiner's initials: _____

INSTRUCTIONS

Use this form to request a copy of an income tax return.

If you are not the taxpayer shown in item 1, you must present documentation reflecting your authorization to receive the confidential taxpayer information. This will generally be a power of attorney or a letter signed by the taxpayer. If the taxpayer is deceased, you must present enough evidence to establish that you are authorized to act for the taxpayer's estate.

Joint tax returns may be disclosed to either the husband or the wife. Only one signature is required. If your name has changed, sign exactly as your name appeared on the return and also your current name. All requests must be signed by the taxpayer or duly authorized agent.

Item 3 — For individuals, enter your social security number (e.g., 000-00-0000). For all other entities, enter your federal employer identification number (e.g., 00-0000000).

Item 6 — Enter the year(s) of the tax form you are requesting. If you need more than three different periods, use additional request forms. Returns which were filed before 1986 may not be available for making copies.

Fee — There are specific fees related to requests by taxpayers for copies of their returns and for certification of returns.

Copies of returns — One dollar for each page reproduced.

Certification — One dollar for each return certified.

Where to file. — After you have completed this form, send it to the District Tax Office where the tax return was filed. You must use a separate form for each District Tax Office from which you are requesting copies.

Note: Processing of copies of returns normally takes 15 working days. You will be notified by telephone or you will be billed through the mail when the copies are ready.

OAHU DISTRICT OFFICE

P. O. Box 259
Honolulu, Hawaii 96809-0259
Telephone: (808) 587-1455

HAWAII DISTRICT OFFICE

P. O. Box 833
Hilo, Hawaii 96721-0833
Telephone: (808) 974-6321

MAUI DISTRICT OFFICE

P. O. Box 1169
Wailuku, Hawaii 96793-6169
Telephone: (808) 984-8500

KAUAI DISTRICT OFFICE

3060 Eiwa Street, #105
Lihue, Hawaii 96766-1889
Telephone: (808) 274-3456